



U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

IFN RCE

# REQUEST FOR CONTINUED EXAMINATION (RCE)

## TRANSMITTAL FORM (37 C.F.R. § 1.114)

DOCKET NO. <b>10191/4094</b>	APPLICATION SERIAL NO. <b>10/577,906</b>	EXAMINER <b>Lin B. OLSEN</b>	ART UNIT <b>3661</b>
INVENTOR(S): <b>Matthias WELLHOEFER et al.</b>		CONFIRMATION NO. <b>6010</b>	

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop: RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Date: August 31, 2009

Signature: \_\_\_\_\_

Jong H. Lee (Reg. No. 36,197)

This is a **request for continued examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. **10/577,906** filed on **December 8, 2006** entitled **CONTROL UNIT AND ACCELERATION SENSOR SYSTEM**. The following constitutes the submission **required** by 37 C.F.R. § 1.114(a) and is attached:

- ☒ **X** Please enter the enclosed **"RULE 116 AMENDMENT ACCOMPANYING RCE"** responsive to the final Office Action dated June 18, 2009.
- ☐ Information Disclosure Statement
- ☐ Drawing Changes
- ☐ Other Submission:

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached. Amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE						810.00
TOTAL CLAIMS	9	MINUS	20	0	52.00	0.00
INDEPENDENT CLAIMS	2	MINUS	3	0	220.00	0.00
MULTIPLE DEPENDENT CLAIM					390.00	0.00
				Number extra must be zero or larger	TOTAL	810.00
	If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.					SMALL ENTITY TOTAL 00

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2. Please charge the required RCE filing fee of **\$810.00** to the deposit account of **Kenyon & Kenyon LLP's**, Deposit Account Number **11-0600**.
3. The Commissioner is hereby authorized to charge payment of the fees, including any additional and/or extension fees required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of **Kenyon & Kenyon LLP's**, deposit account number **11-0600**.

Respectfully submitted,

 (R. No. 36,197)

Dated: August 31, 2009

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